

**City of Auburn/Cayuga County Homeless Task Force  
2014 Local HUD Continuum of Care Competition**

**RENEWAL Project Application**

**A. Project Information**

**Project Name:**

**Total 1 Year HUD Request: \$**

**Project Type:** ☐ Transitional Housing ☐ Support Services Only  
                    **Permanent Housing:** ☐ HMIS  
                    ☐ Rapid Re-Housing  
                    ☐ Permanent Supportive Housing

**B. Recipient Organization Information**

**Organization Name:**

**Director:**

**Address:**

**City:** **Zip Code:**

**Telephone:** **Fax Number:**

**Are there Sub-Recipient Organizations for this project?** ☐ Yes ☐ No  
**If yes, what organization(s)?**

**Application Contact Person Information**

**Name:**

**Telephone:** **E-Mail:**

**2014 Community Priorities**

**Which 2014 Community Priority(ies) does the proposed project address?**

### C. PROJECT OVERVIEW

# of Units: \_\_\_\_\_

# of Beds: \_\_\_\_\_

Households	Households with at least one adult and one child	Adult Households without Children	Households with only Children	Total
Total Number of households				
Total Number of Adults				
Total Number of Children				

Number of Units Dedicated to the Following Sub-populations	Households with at least one adult and one child	Households Without Children	Households With Only Children	Total
Chronically Homeless Non-Veterans				
Chronically Homeless Veterans				
Non-Chronically Homeless Veterans				
Chronic Substance Abuse				
Person With HIV/AIDS				
Severely Mentally Ill				
Victims of Domestic Violence				
Physical Disability				
Developmentally Disabled				
Persons not represented by listed sub populations				

***PLEASE LIMIT ALL NARRATIVE RESPONSES THROUGHOUT THE APPLICATION TO NO MORE THAN 500 WORDS PER QUESTION.***

### **D. PROJECT NARRATIVE**

1. Please provide a brief summary of your project. (*less than 100 words*)
2. How does your project continue to meet a community need?
3. For residential projects, based on your APR, what is the average utilization rate of your project? - (Refer to Project Performance Chart) \_\_\_\_\_%

For SSO projects, what is the annual utilization rate of your project? (Refer to Project Performance Chart) \_\_\_\_\_%

If the average utilization rate is less than 90% (TH, SSO and Safe Haven) or 95% (PH), please explain why. Discuss the barriers and challenges to achieving and sustaining the capacity of your project.

4. Describe the target population(s) served by this project. Why do they need the proposed assistance provided by this project? *(Please include the population's age, gender, special needs, etc.)*
5. Describe how participants access your project. *(What are your outreach methods? Describe intake criteria/restrictions, referral process, etc.)*
6. Describe the type of housing/services being provided. *(How do services move participants through the CoC? Are services on-site or through referral? What is their frequency? Are there follow-up services, etc.)*
7. **For TH Projects Only:** The HUD Project Selection Criteria established in the 2013/14 NOFA clearly prioritizes permanent housing models. Have you looked at other project models; i.e. – PSH, RRH, transition in place, etc.? Are you planning to change to another model? If so, what model are you planning to change to and what's the timeline for implementation? If not, why do you think your current model works the best for your target population?

**For SSO Projects Only:** The HUD Project Selection Criteria established in the 2013/14 NOFA clearly prioritizes permanent housing models. Have you looked at other alternative funding sources?

**For PSH and SH Projects Only:** The 2013/2014 NOFA clearly reinforces HUD's commitment to the PSH model and ending chronic homelessness. How will your project prioritize the chronically homeless for turnover beds? Describe your project's policies/procedures that utilize housing first approaches?

8. Describe how your project ensures that participants will gain access to mainstream resources; ie. TANF, Safety Net, FS, MA, SSI/SSDI, etc.
9. Describe how your project supports achievement of system wide outcomes, for instance: reducing recurring episodes of homelessness (recidivism), reducing lengths of stay in homeless system, assisting homeless persons with securing and stabilizing in permanent housing, etc. How does this project align with Opening Doors, both the Federal and the local 10 year plan strategies to end homelessness? For more about Open Doors, see: [www.usich.gov/opening\\_doors/](http://www.usich.gov/opening_doors/)
10. Does your project serve homeless households with children? ☐ Yes ☐ No  
If yes, please answer the following:
  - a. What is the job title of the person in the project who acts as the educational liaison?
  - b. What are the responsibilities of this position? *(How do they ensure that children are enrolled in school, connected to Head Start, and in compliance with Part C of the Disabilities Education Act, and the McKinney Vento education services?)*
  - c. What is your project policy to ensure that the age or gender of a child under the age of 18 is not used as a basis for denying admission to your project?

11. Does your project use Energy Star equipment/appliances and/or plan for the purchasing of Energy Star products for new or replacement equipment/appliances?

☐ Yes ☐ No

### **E. PROJECT PERFORMANCE MEASUREMENTS**

*(Please complete the chart for the applicable project type)*

- *Performance measurements are based on FY2013-FY2014 NOFA and goals are based on our local performance benchmark*

#### **Transitional Housing and Supportive Services Only Projects (use numbers from Project Performance Chart):**

	<b>Answer (%)</b>
Percentage of participants who moved to permanent housing at exit (Goal 80%)	
Percentage of adult participants who had employment income (Goal: 20%)	
Percentage of adult participants who increased employment income (Goal: 13%)	
Percentage of adult participants who increased income other than employment (Goal: 40% )	
Percentage of adult participants exited with non-cash benefits (Goal: 80 %)	

1. If the Transitional Housing/Supportive Service Only project is not meeting any of the performance benchmarks above, please explain why. Discuss the barriers and challenges in meeting the listed goals.
2. Is there a performance improvement plan in place to work toward meeting these benchmarks if they are not being met?

#### **Permanent Supportive Housing and Safe Haven Projects (use numbers from Project Performance Chart):**

	<b>Answer (%)</b>
Percentage of participants who remained in PSH or moved to other permanent housing (Goal 92%)	
Percentage of adult participants who had employment income (Goal: 20%)	
Percentage of adult participants who increased employment income (Goal: 13%)	
Percentage of adult participants who increased income other than employment (Goal: 40% )	
Percentage of adult participants exited with non-cash benefits (Goal: 80%)	

1. If the Permanent Supportive Housing/ Safe Haven project is not meeting any of the performance benchmarks above, please explain why. Discuss what barriers and challenges exist in meeting the listed goals.
2. Is there a performance improvement plan in place to work toward meeting these benchmarks if they are not being met?

## F. PROJECT SPECIFIC OUTCOMES

Are there any project specific outcome(s) that you would like to share? If yes:

What was the projected measureable outcome? (ie. – 60% of participants who did not have a GED or high school diploma enrolled in school)

What was the actual measureable outcome?

Is the outcome(s) tracked in HMIS? Yes \_\_\_\_ No \_\_\_\_

If no, describe how outcome data is collected, what tool is used, etc.

## G. FISCAL INFORMATION

**PLEASE ANSWER THE FOLLOWING QUESTIONS:**

1. Have you requested an extension for your most recent contract year? ☐ Yes ☐ No
2. Start and end date of your most recent HUD award (current contract year):  
(If extension has been granted, make sure current contract year reflects the extension granted)  
  
\_\_\_\_\_ to \_\_\_\_\_
3. Total amount of award: \$ \_\_\_\_\_
4. Amount of funds drawn down as of May 31, 2014: \$ \_\_\_\_\_
5. Do you anticipate that you will have unexpended funds at the expiration date of your current contract?  
☐ Yes ☐ No If yes, how much? \$ \_\_\_\_\_
6. Have you had unexpended HUD funds at the expiration of grant terms in the past 3 years?  
  
☐ Yes ☐ No If yes, how much?
 

2013	\$ _____
2012	\$ _____
2011	\$ _____

7. When was your most recent HUD monitoring visit? \_\_\_\_\_

If you have not submitted a copy of the monitoring report in the past, please attach it to your application.

**Application Checklist:** *(Please check and submit the following that apply to your project to)*

- ☐ Application
- ☐ Budget
- ☐ Most recent audited financial statement
- ☐ Documentation of Match and Leveraging
- ☐ Most recent HUD monitoring report (if not submitted in a past year)
- ☐ Any other attachments that may be required (ie. – for new projects proof of site control, etc.)

### **H. ASSURANCES**

To the best of my knowledge and belief, all information in this application is true and correct. The governing body of the applicant has duly authorized submission of this document and the applicant will comply with the following:

- Applicant will complete the HUD Project Application forms with the same information as contained in this application, unless the Project Selection Committee has made adjustments during the rating/ranking process. Those adjustments would supersede this document and are included in the Project Ranking Letter sent to each applicant
- Applicant understands that the Rescue Mission, as the CoC lead for City of Auburn Cayuga County Homeless Task Force, coordinates the local application process and it is necessary to begin the process before HUD begins the 2014 CoC project funding process. Any changes that need to be made on the projects based on HUD requirements will supersede this document.
- Applicant agrees to participate fully in the Homeless Management Information System (HMIS).
- Applicant agrees to a user fee payment for the HMIS System.
- Applicant agrees to abide by all CoC Written Standards applicable to the project that funding is requested for.
- Project agrees to participate in the Coordinated Entry system, which includes the use of a Common Assessment tool, when fully implemented in the CoC.
- Applicant understands that HUD CoC-funded homeless projects are monitored by the Monitoring Committee of the Homeless Task Force. This can include an annual site visit, annual submission of the applicant's most recent APR submitted to HUD, and the most recent audited financial statement.
- If awarded funding, the applicant agrees to inform the CoC Lead Agency when the following occur:
  - ✓ The organization has staff vacancies that are of a duration that could affect the projected number of participants served, or result in HUD funds not being fully expended
  - ✓ There are changes to an existing project that are significantly different than what the funds were originally approved for, including any budget amendments/modifications submitted to HUD

- ✓ There are increases/decreases of other funding to the project that could affect the projected number of participants served, services provided, ability to meet matching or leveraging requirements, etc.
- ✓ There are significant delays in the start-up of a new project

<b>Name:</b> (please type)	
<b>Title:</b>	
<b>Phone:</b>	
<b>Email:</b>	
<b>Signature:</b> (if application is scanned)	
<b>Date:</b>	